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December 5, 2002 I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C.

(Typed or printed name of person mailing paper or fee) (Signature of person mailing paper or fee) Patent Attorney's Docket No. <u>032775-047</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

·					
In re Patent Application of (· · · · · · · · · · · · · · · · · · ·				
Donald Morris, et al.) Group Art Unit: 1636				
Application No.: 09/847,355)	Examiner: Lambertson, David A.				
Filed: May 3, 2001) Confirmation No.: 6889				
For: Virus Clearance of Neoplastic Cells) FROM MIXED CELLULAR COMPOSITIONS)					
AMENDMENT/REPLY TRA	ANSMITTAL LETTER				
Assistant Commissioner for Patents Washington, D.C. 20231					
Sir:					
Enclosed is a reply for the above-identified pater	at application.				
[] A Petition for Extension of Time is also en	nclosed.				
[] A Terminal Disclaimer and a check for [] \$55.00 (2814) [] \$110.00 (1814) to cover the requisite Government fee are also enclosed.					
[X] Also enclosed is <u>a copy of pages 25 and Immunology</u> (Abbas et al., 4 th ed.), W.B. Sar Pennsylvania					
[] Small antity status is haraby alaimed					

Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the

[] Applicant(s) previously submitted ___, on ___, for which continued examination is

[] \$370.00 (2801) [] \$740.00 (1801) fee due under 37 C.F.R. § 1.17(e).

[]	Applicant(s) request suspension of action by the Office until at least _, which does not
	exceed three months from the filing of this RCE, in accordance with 37 C.F.R.
	§ 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

- [] A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (146/246) is also enclosed.
- [X] No additional claim fee is required.
- [] An additional claim fee is required, and is calculated as shown below:

	No. OF CLAIMS	A M E N D E D HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Fotal Claims		MINUS =		× \$18.00 (1202) =	
Independent Claims		MINUS =		× \$84.00 (1201) =	
f Amendment adds mu	ltiple depend	ent claims, add \$280	0.00 (1203)	· · · · · · · · · · · · · · · · · · ·	÷
Total Amendment Fee					
f small entity status is	claimed, sub	tract 50% of Total A	mendment F	ee	

[] A claim fee in th	ie amount of \$	is enclosed
[] Charge \$	to Denosit Acco	unt No. 02-4800

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Ping F. Hwung
Registration No. 44,164

P.O. Box 1404 Alexandria, Virginia 22313-1404 (650) 622-2300 Date: December 5, 2002